Properly Coding Hypertension

The official guidelines in the ICD-10-CM manual give specific instructions for coding primary hypertension in patients with heart disease and/or chronic kidney disease.

Hypertension is presumed, by convention, to be causative for the heart and/or kidney disease in these patients unless documented as otherwise by the physician. Code as:

- I 11._ Hypertensive Heart disease OR
- I 12._ Hypertensive Chronic Kidney Disease OR
- I 13._ Hypertensive Heart and Chronic Kidney Disease
- *** The N code specifying the stage of CKD must also be included whenever CKD is present***

In patients with heart failure due to hypertensive heart disease, code first I 11.0, I13.0 or I 13.2 for the type of hypertensive disease with heart failure, then code also the specific I 50 code for the type of heart failure.

Continue to use diabetes combination codes as appropriate for patients with diabetes and hypertensive disease, such as E 11.22, diabetes with CKD, in addition to the HTN combination codes.

The Problem with Problem Lists

Problem lists can be a source of misinformation when filled with outdated problems.

They should be viewed and updated at each encounter. This practice:

- prevents old diagnoses from being reported as current, especially if you drag and drop from the problem list to your assessment and plan
- allows for correction of nonspecific diagnoses to more specific ones, possibly leading to an HCC designation
- gives a truer picture of the patient to other clinicians sharing in that patient's care

CPT II Codes for Reporting Blood Pressure Values

3074F	CPT II	Most recent systolic blood pressure less than 130 mm Hg
3075F	CPT II	Most recent systolic blood pressure 130 – 139 mm Hg
3077F	CPT II	Most recent systolic blood pressure greater than or equal to 140 mm Hg
3078F	CPT II	Most recent diastolic pressure less than 80 mm Hg
3079F	CPT II	Most recent diastolic pressure 80 – 89 mm Hg
3080F	CPT II	Most recent diastolic pressure greater than or equal to 90 mm Hg